Department of Veterans Affairs
Office of Geriatrics and Extended Care



Geriatric Research Education and Clinical Center

Discover, Educate and Innovate to Improve Health for Older Veterans

FY 2020 Annual Report September 2021

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INTRODUCTION

This report summarizes fiscal year (FY) 2020 activities of the Veteran Health Administration geriatric centers of excellence, the Geriatric Research, Education and Clinical Centers (GRECCs). As is evident from even a brief perusal of their work, the GRECCs enhance the VA's mission in countless ways. GRECCs conduct cutting-edge biological, clinical and health services research; generate novel and exportable clinical interventions; and provide critical geriatrics-related education to VA's workforce. GRECC staff serve as a valuable resource for Veterans Integrated Services Networks (VISNs) and medical centers and hold many crucial leadership positions within them. Although this report contains many numerical outcomes, including performance measures, it is impossible to quantify all the activities of the twenty GRECC sites.

The GRECCs would not exist and would not thrive, without the support of their Veteran Integrated Service Networks (VISNs) and host medical centers. On behalf of the Office of Geriatrics and Extended Care, I offer them a hearty thanks for making this work possible.

I also thank the Geriatrics and Gerontology Advisory Committee (GGAC), which provides policy guidance to the Secretary about all geriatric issues, oversees the GRECCs and conducts site visits to each GRECC. The VA greatly benefits from the expertise and thoughtfulness of the Committee in crafting its recommendations for national programs and GRECC sites.

I welcome your thoughts and comments about the GRECC program and the contents of this report. Please feel free to contact me at Marianne.Shaughnessy@va.gov for additional information.

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BACKGROUND, HISTORY AND OVERSIGHT

GRECCs were formed to prepare for the wave of aging Veterans with unique health needs that was going to challenge the resources and expertise of the Veterans Health Administration (VHA). The first six GRECCs were initiated in 1976. In 1980, Public Law 96-330 mandated GRECCs to "advance scientific knowledge regarding the medical, psychological, and social needs of older Veterans, and the means for addressing them, through: (1) geriatric and gerontological research; (2) the training of personnel providing health care services to older persons; and (3) the development and evaluation of improved models of clinical services for eligible, older Veterans."

In 1985, Public Law 99-166 authorized up to 25 sites to be designated as GRECCs. Presently, 20 GRECCs are in operation at 25 sites in 17 Veterans Integrated Services Networks (VISNs); all VISNs except VISN 15 have at least one GRECC. Three VISNs (8, 10 and 19) each have two GRECCs. Other than the original six GRECCs, each site subsequently chosen has been selected in response to a call for proposals that was then subjected to peer review from both within and beyond VA. A subset of the original applicants was then subjected to on-site reviews by a team made up of members of the VA Geriatrics and Gerontology Advisory Committee (GGAC), a group of non-VA stakeholders and geriatrics experts chartered in the same 1980 legislation that authorized the GRECCs. GGAC is charged with overseeing GRECCs as well as providing input to the Secretary and Under Secretary for Health on aging Veterans and the agency's programs on their behalf.

The GRECC mission was and remains devoted to: (1) conducting research to address the origins and management of diseases and disabilities affecting the elderly; (2) employing those findings to develop, test and disseminate clinical approaches and models of care to improve the clinical management of aging Veterans; and (3) educating the workforce and trainees in VA and the community on the healthcare needs and management strategies that have been found to be most successful.

By law, each GRECC has a tripartite mission of geriatric and gerontological research, education and clinical innovation:

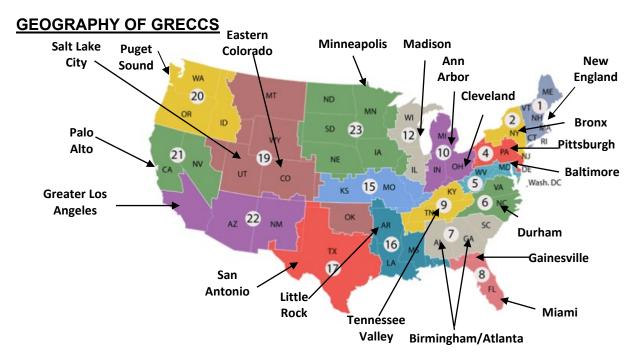
- The research mission at each site consists of funded, peer-reviewed investigations within one or more circumscribed focus area(s) in the basic biomedical, applied clinical and health services/rehabilitative issues surrounding aging, the aged and their health care and functional needs.
- The education mission is focused on the training of health providers in the care of the elderly, at undergraduate and postgraduate levels among both VA staff and community providers, and in partnership with academic affiliates; within local as well as regional and national spheres; and covering a broad range of disciplines.
- The clinical innovation mission is intended to advance the practice of geriatric care through the development and evaluation of new approaches, which when

demonstrated as effective, are to become integrated into the fabric of, and supported by, the parent health care system and then, ideally, exported elsewhere within VA and beyond.

GRECCs are VHA Centers of Excellence and are therefore subject to the terms for oversight described in Directive 1215, "Standards for VHA Centers of Excellence." The Office of Geriatrics and Extended Care conducts ongoing oversight of GRECC activities, responds to queries from GRECCs and organizes cross-GRECC activities, including regular communications among the Directors and each of the Associate Director groups, as well as other ad hoc committees.

Each GRECC submits information on an annual basis about their research, educational and clinical activities, as well as any challenges in accomplishing goals. This information is entered into a database from which reports are compiled. Performance measures are computed from these data. GEC leadership holds calls with each GRECC to review the report and to discuss plans for the coming year.

In its oversight role, GGAC normally convenes twice annually in VA Central Office. In FY 2020, due to pandemic restrictions, only one meeting was held, which was a virtual meeting, and the findings of the FY20 annual reports were reviewed. GGAC usually site visits the GRECCs, during which the GGAC Chair, GEC staff and several committee members review the previously-submitted annual reports along with self-studies completed by the GRECCs and interview respective leadership of the GRECC, the VA Medical Center, the VISN, the University Affiliate(s) and the Advisory Subcommittee. The site visit reports become part of the GGAC's annual report to the VA Secretary, which by statute, is also sent to the respective Chairs and Ranking Members of the House and Senate VA oversight subcommittees. In 2020, no in person GRECC site visits were conducted due to the SARS-CoV-2 pandemic.



VA's Geriatric Research, Education and Clinical Centers

A list of all the GRECCs, including leadership and areas of focus, is included at the end of this report.

Note: This report contains multiple references to GRECC publications, products and projects. A searchable database is provided at the conclusion of this report for VA users. Non-VA users may contact Marianne.Shaughnessy@va.gov for access to any of the items referenced herein.

GRECCs by the Numbers 2020

These national totals provide some perspective on the scope and overall contributions of the GRECCs:

	Totals
Number of GRECCs	20
Total GRECC Staff	513
Total GRECC FTE	280.8
Number of aging-related presentations by GRECC staff	2626
Career development awardee mentees	268 ¹
Number of grants and projects awarded	750
Peer-reviewed publications	1605
Grants reviewed	443
Manuscripts reviewed	3178
Trainees slots for allied health	408
Medicine residents, fellows and students who rotated through	1538
GRECC sites	
Total annual grant and projects expenditures	\$168,623,445.89
Total qualified research expenditures (subject to VERA)	\$109,053,709.65
VERA allocation for GRECC trainees	\$ 9,766,610.97

^{*} This sums the mentees that each GRECC staff person supervised. This was not necessarily as the primary or only mentor, so some mentees may be double counted.

GRECC CONTRIBUTIONS

As part of their annual reporting process, GRECCs enumerate their contributions to research, education, clinical and administrative programs within their VISNs, medical centers and national program offices. National contributions include dissemination of novel clinical programs, such as Gerofit, an exercise program for community-dwelling older adults which is offered in 17 VA facilities, and Advanced Care Planning-Group Visits, where discussions about options and preferences about end of life care options are offered in 55 VA facilities. Four GRECCs implemented Geriatric Emergency Departments and two GRECCs assisted with implementation of Age-Friendly principles at their medical centers. GRECC national education activities for VA trainees and staff include the Geriatric Scholars Program, GRECC Webinars, dementia training and VIRTUAL Geriatrics (formerly known as GRECC Connect.) Two noteworthy educational products include Start Making Sense: How to Communicate Effectively with Veterans with Dementia, which has been disseminated nationally and been added to the VHA Dementia System of Care Directive and the Community Living Center (CLC) Toolkit of Best Practices. All these educational offerings are critical to enhancing the care Veterans receive.

GRECC research topics have included medication safety, deprescribing, weight loss, frailty, Traumatic Brain Injury (TBI) and Alzheimer's Disease as well as health services for older adults. During the SARS-CoV-2 pandemic, GRECCs responded by creating COVID note templates for symptom management and rapid development of telehealth training for providers on the use of VA Video Connect (VVC). They also developed training products on COVID and Delirium and published <u>National Geriatric Network Rapidly Addresses Trainee Telehealth Needs in Response to COVID-19</u> and <u>Caring for Caregivers During COVID-19</u>. Lastly, three GRECCs are part of modernizing the national Electronic Health Record (EHR) workgroup, specifically working on the geriatric inpatient and outpatient care and intensive care unit (ICU) sections of the EHR.

GRECC clinical projects included medication safety, Patient Aligned Care Team (PACT) dementia care models and TeleDementia clinics, Enhancing Quality of Prescribing Practices for Older Veterans Discharged from the Emergency Department (EQUIPPED, in two VISNs) and antimicrobial stewardship. GRECC Education for VA staff and trainees included PACT Dementia modules, COVID-19 vaccine education and PTSD and Moral Injury. Noteworthy is the Gainesville GRECC Virtual Dementia Tour that provided innovative training of facilitators at each CLC on what it's like to be a Veteran with Dementia.

GRECCs also contribute at VISN levels to ensure that geriatric research, education and clinical projects reach facilities within their VISN along with their host site. GRECC research activities conducted at a VISN level include clinical projects focusing on Medication Management, Deprescribing, Bone Health, Traumatic Brain Injury, as well as providing support for Regional Health Information Organizations and statistical analysis.

At a local level, GRECC investigators serve as leaders in many Centers on Aging located within their University-affiliate sites. They study Alzheimer's Disease, Parkinson's Disease, COVID-19 effects on those in long-term care settings and identify optimizing flu prevention regimens for Veterans residing in State Veterans Homes (SVHs). Clinical programs at the local level include mobility and exercise programs, falls assessments, TeleDementia clinics and infection control practices. GRECC educational staff oversee Nurse Practitioner (NP) and Integrated Medicine residencies, delirium screening and education programs, managing challenging behaviors in the CLC, elder abuse prevention and educating providers on Veteran Video Connect technology. Another important contribution, difficult to quantify but regularly brought to light during every GRECC site visit by GGAC, concerns recruitment of talented and productive clinicians to VHA. Many of the associated health trainees' clinical preceptors state that their training experiences in VA began in GRECC and that the interdisciplinary care VHA provides to Veterans remains unmatched in the private sector. Many funded GRECC researcher-physicians avow that they would not be in full-time academic positions if not for the resources, collaborations, research opportunities, stability and mix of responsibilities within a GRECC. These scholars bring tangible and intangible assets to their VAMCs and university affiliates. They serve as magnets for other recruitments, trainees and resources, and assist in strengthening ties with academic affiliates. They elevate the visibility, academic environments and clinical capabilities of their host medical centers and of the entire VHA system.

GRECCs provide material value to their VISNs by several mechanisms. First, research expenditures are "recaptured" by means of the Veterans Equitable Resource Allocation (VERA) research allocation, in which a proportion of the total money spent on a grant is calculated, and this amount is given to the medical center to support the research. (It is analogous to "indirect costs" in NIH grants.) Second, medical centers receive money through VERA for educational activities, based on the number of trainee slots. Third, education projects receive money through various mechanisms, including the Office of Rural Health. Finally, GRECC staff perform clinical activities that are not directly related to the GRECC, but that benefit the medical center.

Awards:

From the dozens of awards and recognitions earned by GRECC researchers, several deserve special mention. Dr. Al Siu of the Bronx GRECC was elected to the National Academy of Medicine. Dr. Bill Banks of Puget Sound and Dr. Robert Bonomo of Cleveland received the VA's William S. Middleton Award for outstanding achievement in research. Dr. Bandana Chatterjee of San Antonio received a Fulbright Scholar Award. GRECC researchers won best paper awards at the American Geriatrics Society, Academy of Geriatric Emergency Medicine, and International Medical Informatics Association meetings.

In FY 2020, GRECC staff were recognized locally for their contributions. They received numerous teaching awards, "top doctor" recognitions, and awards for mentoring, research, scholarship, and humanitarian work.

Key Leadership Activities

GRECC staff led and participated in key national committees and initiatives, including Geriatric Scholars Program, VA Geriatric Emergency Department Task Force, Healthcare Infection Control Practices Advisory Committee Long-Term Care Work Group working with the Centers for Disease Control (CDC), VA Patient Center of Inquiry for medication safety and numerous research panels. GRECC leaders also serve as leaders on national councils such as the American Geriatric Society, American Federation for Aging Research and the National Scientific Advisory Council.

GRECC staff served on and chaired numerous medical center committees, including Offices of Academic Affiliations (OAA), Research and Development (ORD), Ethics, Institutional Review Boards (IRB) and Rehabilitation and Extended Care Integrated Clinical Communities (REC ICC). GRECC staff also led departments, service lines, residency programs and clinical programs at their host facilities and academic affiliates.

GRECC leaders were elected President, Vice President, or President-elect of The Obesity Society, International Diabetes Neuropathy Consortium, American Academy of Hospice and Palliative Medicine, American Aging Association, Pacific Northwest Neuropsychological Society, Seattle Institute for Biomedical and Clinical Research (SIBCR) Board of Directors, Population Health for Vanderbilt Health Affiliated Network, Public Health and Health Care for Vanderbilt University Medical Center and American Association for Women in Radiology. They also have main leadership roles in national organizations focused on clinical care, medical subspecialties, education and research. They also sit on boards of directors for numerous community organizations.

RESEARCH ACTIVITIES



GRECCs are required by statute to conduct research on aging-related topics, including basic biomedical, applied clinical and health services research. GRECC primary core staffing is recommended to include 5.0 research Full Time Employee Equivalent (FTEE); and an average research effort of at least 40% time by all GRECC research staff is required and enforced as a performance monitor.

GRECC researchers served as principal investigators on more than **750** funded projects in FY 2020. The total annual research expenditures for projects with GRECC investigators were over \$168 million, of which 35% was VA-supported research (e.g., Merit, Cooperative Study, Career Development, etc.); 60% non-VA governmental and

other peer-reviewed funding (e.g., National Institutes of Health (NIH), university support); and 5% private corporation, donated or proprietary funds.

GRECC staff published over **1,605** peer-reviewed publications in FY 2020, including some key breakthroughs in advancing the science of geriatrics. Many have direct relevance for the health of older adults. Some of the highlights are:

- Honoring Veterans' Preferences: The Association Between Comfort Care Goals and Care Received at the End of Life (Ann Arbor)
- Lessons learned Outbreaks of COVID-19 in nursing homes (Baltimore)
- Virtual Geriatrics: Geriatrics Telehealth to Empower Health Care Providers and Improve Management of Older Veterans in Rural Communities (Birmingham/Atlanta)
- Adapting a Hospital-at-Home Care Model to Respond to New York City's COVID-19 Crisis (Bronx)
- What are the sources of exposure in healthcare personnel with coronavirus disease 2019 infection? (Cleveland)
- The Fierce Urgency of Now: Addressing Racial and Ethnic Disparities in Serious Illness Care (Durham)
- Anywhere to Anywhere: Use of Telehealth to Increase Health Care Access for Older, Rural Veterans (Eastern Colorado)
- Geriatric Care Boot Camp Series: Interprofessional education for a new training paradigm (Gainesville)
- Development of a dyadic sleep intervention for Alzheimer's disease patients and their caregivers (Greater LA)
- Rationing Limited Healthcare Resources in the COVID-19 Era and Beyond: Ethical Considerations Regarding Older Adults (Little Rock)
- The Association Between Neighborhood Socioeconomic Disadvantage and Readmissions for Patients Hospitalized With Sepsis (Madison)
- Caring for Caregivers During COVID-19 (Miami)
- Benefits and Harms of Prescription Drugs and Supplements for Treatment of Clinical Alzheimer-Type Dementia (Minneapolis)
- Advancing Assessment in Clinical Gerontology (New England)
- Postoperative Function as a Measure of Quality in Geriatric Surgical Care Can We Do Better? (Palo Alto)
- Cardiac Rehabilitation During COVID-19 Pandemic: Highlighting the Value of Home-Based Programs (Pittsburgh)
- An Agenda for Addressing Multimorbidity and Racial and Ethnic Disparities in Alzheimer's Disease and Related Dementia (Puget Sound)
- Aligning the 4Ms of Age-Friendly Health Systems With Statin Use for Primary Prevention (Salt Lake City)
- A Geriatrics Walking Clinic Improves Hemoglobin A1c and Time Gait in Veterans with Type 2 Diabetes (San Antonio)

 A study protocol for a randomized controlled trial of family-partnered delirium prevention, detection, and management in critically ill adults: the ACTIVATE study (Tennessee Valley)

GRECCs helped to ensure the high quality of scientific research in America, reviewing 874 grants and 4552 publications, serving on 402 editorial boards and leading local and national research societies. GRECC staff promoted the next generation of research investigators, with 268 research mentoring relationships (a GRECC investigator with a career development awardee).

EDUCATION AND EVALUATION ACTIVITIES



The GRECCs are charged with a broad education mission: 1) to provide ongoing training in geriatrics for the host facility clinical staff, 2) to provide regional and national continuing medical education, 3) to train medical and health care professions students in geriatrics and gerontology and 4) to mentor junior faculty and post-doctoral researchers. All GRECCs have close ties to their affiliated medical school; many maintain close working relationships as well with other health professional programs (e.g., nursing, psychology, social work, pharmacy, rehabilitation therapies, audiology/speech pathology, dentistry, podiatry and optometry) of the medical school affiliate and of other universities.

GRECCs carried out a number of innovative education projects in FY2020, aimed at ensuring that VA's workforce has the skills and experience needed to provide high-quality care to aging Veterans. Some of the highlights are:

- Updated conference series to include Diversity and Aging: Aging, Cognition and Mental Health Lecture Series: Practical and Ethical Considerations for Interprofessional Teams (Ann Arbor)
- New book by Dr. Beth Hogans titled <u>Pain Care Essentials</u>, which uses a casebased approach to educate trainees and providers on pain management (Baltimore)
- "PRIDE in All Who Served" is a 10-week health education group for LGBT Veterans focused on reducing related health care disparities (Birmingham/Atlanta)
- Topics in Geriatric Medicine Series offers a geriatric topic with Continuing Medication Education (CME) accreditation every Friday for VA and private sector health care professionals (Cleveland)
- 5 T's Framework provides research education for improving the inclusion of older adults in research (Durham)

- Ethics Seminar Series (5-part series) is offered every other month and provides a case study on ageism surfacing implicit and explicit biases, virtual dementia tour and practice ethical decision making using an 8-step approach (Eastern Colorado)
- Stress management in the time of COVID-19 for VA clinical professionals deployed to long-term care settings (Gainesville)
- Co-developed a web-based curriculum to address pain treatment and opiate use in older adults (Greater LA)
- Ask the Expert sessions (19 webinars) covering geriatric health topics that included Continuing Education credit (CEUs) (Little Rock)
- Geriatric Conversations Late Life Depression: a virtual patient learning module (Madison)
- Goals of Care Discussions in Advanced Heart Failure, a conversation guide for having patient-centered goals of care discussions with Veterans with advanced heart failure (Miami)
- My Life/My Story training learning session for second-year medical students in geriatrics (Minnesota)
- An Interactive Case on decision-making capacity that follows a patient whose dementia worsens over time (New England)
- Flyers for Apple and Android users on how to access VA Apps and how to connect with family during the pandemic (Palo Alto)
- Chronic Pain Management Guide (electronic) for providers offers baseline history questions, physical exam essentials, treatment approaches, communication tips, links to websites and stepped pharmacological care (Pittsburgh)
- Geriatric Scholars Program providing musculoskeletal training for Primary Care and Geriatric Providers focused on the physical examination and clinical management of common knee and shoulder complaints. (Salt Lake City)
- Development and distribution of the 3Ds (Dementia, Delirium and Depression)
 Pocket Card distributed to all VA GRECC sites (Puget Sound)
- Interprofessional training on the 5Ms of Geriatrics and Palliative Care (San Antonio)
- Interprofessional learning to evaluate GRECC Associated Health Trainees (AHT) on Interprofessional Education Collaborative (IPEC) competencies (Tennessee Valley)

GRECCs provided a total of **168,473 qualified person-hours** of educational activities in FY 2020. These were learning events on a geriatric-related subject, geared toward VA staff that included an evaluation process. This represents a substantial part of geriatrics-related education in VA. In addition, GRECC staff gave **2,626 lectures** in FY 2020. (Note: These two processes may have some overlap.) The GRECC supported HRSA-funded Geriatric Workforce Enhancement Project (GWEP) sites by providing lectures and organizational support.

GRECCs were awarded 42 education and training grants in FY 2020, totaling about \$9.8 million.

GRECCs serve as an institutional home for the Rural Intensive Team Training program, and the GRECC-CBOC Connect initiatives and the Geriatric Scholars program. In FY 2020, the Geriatric Scholars Program (organized through the Greater Los Angeles GRECC) engaged 4,084 learners and a total of 348,345 person-hours of education/training and has broadly enhanced VA's capacity to care for older Veterans across treatment settings.

GRECCs provide medical students, medical residents and fellows with valuable clinical experiences in geriatrics through a selection of inpatient and outpatient programs:

Medical Discipline	Total Trainees FY 2020
Internal Medicine Resident	586
Psychiatry Resident	25
Family Medicine Resident	45
Other Resident	34
Geriatric Medicine Fellow	120
Geriatric Psychiatry Fellow	13
Other Fellow	44
Medical Student	671
Total Medical Trainees	1,538

The GRECCs also support a large number of affiliated health disciplines supported by the Office of Academic Affiliations (OAA), ensuring that they gain clinical experience in the care of older adults. GRECCs also accept additional trainees from their University affiliates. Each "slot" in the table below represents a full-time position, which may be split across multiple trainees.

Affiliated Health Discipline	OAA Slots	Non-OAA Slots	# Taking VA Job
Audiology/Speech Pathology	38	19	6
Chaplainry	8	1	0
Dietetics	1	0	0
Nurse Practitioner	46	0	2
Nursing	12	0	0
Occupational Therapy	21	11	0
Optometry	26	8	1
Other	1	0	0
Pharmacy	32	42	12
Physical Therapy	25	16	0
Social Work	56	9	7
Psychology	29	17	1
Total	295	113	29

Although it is difficult to track post-fellowship outcomes, the data collected for this report indicates that at minimum, 29 (10%) of the OAA-affiliated health trainees took jobs within the VA after completion of their program. This suggests that the GRECCs serve a crucial role in developing geriatric trained clinicians for the VA.

CLINICAL ACTIVITIES



GRECCs are responsible for enhancing the clinical care of elderly Veterans through development, evaluation and dissemination of innovative approaches to care. Numerous innovative approaches have been developed in GRECCs in the four decades since the inception of the program and many are now part of the mainstream VHA clinical portfolio. GRECCs have a mandate to conduct clinical demonstration programs, by developing, field-testing, evaluating and disseminating novel models of care for older Veterans. The projects are supported by VISNs through memoranda of understanding. Each has a roughly five-year cycle. Not all clinical innovations will succeed, so there is no expectation that every project will be disseminated.

The GRECCs carried out 143 clinical innovation projects in FY 2020. Twenty-two projects were in development, 24 were being field-tested, 61 were being applied and evaluated, and 36 were disseminated to other sites. Many of these projects address high priority areas for VA, including improving quality in long-term care, optimizing use of telehealth and management of complex chronic conditions. Many also support the Whole Health transformation. The table below shows all the projects in FY 2020.

GRECC Site	Clinical Demonstration Projects
	 Long Term Follow-Up of Deprescribing Initiative at Rural CBOCs
Ann Arbor	Optimizing Safe Medication Use in Older Adults via In-home Telepharmacy
	Understanding Falls in a Post-Acute Care Setting (CLC)Gerofit
	 Home-based Team Transitional Telecare to Optimize Mobility and Physical Activity in Recently Hospitalized Older Veterans
	 Pain Scores and Pain Medication in the Community Living Center
	TeleGeriatrics Consultation/Co-Management for Rural Older Veterans

	Interdisciplinary Geriatrics Clinic with Behavioral Health and Neuropsychological Evaluation and Management
Baltimore	 Falls and Frailty Clinic Veteran and Companion Dog Foster Program Home Exercise Program for Home Bound Older Veterans (HEX) Gerofit Tele-Gerofit Telehealth Total Joint Pre-Hab demonstration project Renal Interdisciplinary Safety Clinic (RISC)
Birmingham/ Atlanta	 Tele-IMPROVE: Remote Integrated Management and Polypharmacy Review of Vulnerable Elders Expanding Enhancing Quality of Prescribing Practices for Veterans Discharged from the Emergency Department (EQUIPPED) Continence Clinical Video Telehealth (CVT) Virtual Geriatrics
Bronx/New York Harbor	 Patient Safety Center of Inquiry Deprescribing Collaborative Interdisciplinary ALS Program Rural Interdisciplinary Team Training Hospital in Home Virtual Geriatrics
Cleveland	 Factors involved in Readmission for Older Veterans Receiving Early Homecare Geri-Vet Hospital In Home
Durham	 Falls Assessment of Medications in the Elderly Dementia Warning Signs to Promote Dementia Detection in Primary Care Elder Care in Hospital (ECHo) Gerofit Dissemination Perioperative Optimization of Senior Health (POSH) Renal Silver STRIDE: Assisted Early Mobility for Hospitalized Older Veterans COACH Integrated Dementia Care Clinic Virtual Geriatrics VISN 6 Bone Health Service Improving Care of High-Risk Older Adults in the Emergency Department

Eastern Colorado	 ECHCS Virtual Geriatrics Assistive Listening Devices Targeted Audiologic Training for Associated Health Trainees and Geriatric Medicine Fellows ECHCS Medically Complex Tele-Rehabilitation (MC TeleRehab) Safety in Dementia: Development of an Online Caregiver Tool for Firearm, Driving and Home Safety Gait Speed Screening Initiative: To Identify Veterans at Risk of Losing Independence during COVID-19 Pandemic and Beyond Interdisciplinary Mobility Program for Veterans in Skilled Nursing Facilities Promoting Hearing Aid Self-Sufficiency by Enhancing Skill Building, Access to Information and Caregiver Support
Gainesville	 Development of culturally relevant and age-appropriate caregiver education and training in collaboration with VA Caregiver Support Program Development of a Delirium Simulation Education Curriculum Virtual Reality Delirium Prototype Development Optimizing the electronic health record to improve nutritional care for Veterans An Initiative to Improve Inpatient Influenza Vaccination Rates Enhancing the Quality of Prescribing Practices for Older Adults from the Emergency Department
Greater Los Angeles	 Gerofit@UCLA (UCLA undergraduate volunteer to serve as trainers at the facility) Pre-Hab (Dissemination) Gerofit – Dissemination to rural CBOCs Pre-Hab to Improve Outcomes in Elective Surgeries in Frail, Older Veterans Use of UCLA Undergraduate Volunteers (Gerofit@UCLA) to facilitate post-op mobilization of Gerofit Pre-Hab participants Pharmacist-Led Interdisciplinary Support of Older Veterans with Difficult to Control Hypertension
Little Rock	 Advance Care Planning via Group Visits (ACP-GV) Gerofit Geriatric Walking Clinic Tai Chi Collaboration for Veterans Whole Health Tele-memory Clinic Implementing Innovations in Rehabilitation to Promote More Rapid Goal Attainment Virtual Geriatrics

Madison	 Virtual Geriatrics Enhancement Project Supportive C-TraC Program Elder Veterans Prevention Program Becoming a Model Dementia Friendly Hospital within VHA Cognitive Care Clinic VA Intensive Dysphagia Treatment Program
Miami	 Gerofit Improving Access to Geriatric Care in Rural Areas: Virtual Geriatrics MyHealtheVet to Enable Shared Decision Making (SDM) Regarding Menopausal and Associated Symptoms (MAS) in Postmenopausal Women Veterans VSAFE-SURG/Geriatric Surgery Verification Program An Intervention to Reduce Overtreatment of Type 2 Diabetes in Older Veterans Hypoglycemia Detection and Prevention Project (HDPP) for older Veterans at High Risk Educational Needs Assessment for VISN 8 High Risk Veterans and their Caregivers Otago Exercise Program for Timely Improvement of Mobility and Living (VA OPTIMAL)
Minneapolis	 PACT Dementia Care Model Theta Burst Stimulation (TBS) for BPSD Behavioral Recovery Outreach Team Health Care Directives for Veterans with Dementia Motorized Walker Post-Operative Delirium
New England	 FaCT Clinic (Family and Caregiver Telemedicine) The Coordinated Transitions of Care (C-TraC) program The Palliative Coordinated Transitions of Care (C-TraC) program Geriatric Capacity Evaluation Clinic Live Long Walk Strong Neuropsychology Visit Experience Survey The Geri Renal Clinic The Geriatric Cardiology Clinic What Matters Most-Structured Interview Gerofit Hospital in Home Later Adulthood Trauma Re-Engagement Group
Palo Alto	 Veteran Video Connect Balance, Exercise and Strength (VVC-BEST) Geri-Mobile Health Cognitive Assessment Clinic E-Consults for Behaviors in Dementia

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Pittsburgh	 Office of Rural Health (ORH), Promising Practice Homebased Cardiac Rehabilitation Geriatric Polypharmacy e-consult Gerofit Office of Rural Health (ORH), Promising Practice TeleDementia Caregiver Support Group Office of Rural Health (ORH), Promising Practice TeleDementia Clinic
Puget Sound	 Patient Priorities Care (PPC) in CLCs Telemedicine, Adherence and Geriatric Veterans: Improving Medication Compliance Using Mobile Technology (TAG-Vets) Healthy Aging Project – Brain (HAP-B) Dementia Immersion Simulation Experience (DISE) Veteran Increased Access to Neuropsychological Services via Telehealth (via TeleNP)
Salt Lake City	 Modeling Future Need for Long-Term Support Services Connecting Rural Veterans to the Utah Aging and Disability Resource Connection for Information and Referral and Options Counseling Services VA Life-Sustaining Treatment Decision Initiative Rural Access Data Analysis Resource Virtual Care Connect to Montana
San Antonio	 VISN 17 CLC Needs Assessment DISE (Dementia Immersion Simulation Experience) Geriatrics Medication Education at Discharge (GMED) VIRTUAL Geriatrics Life Sustaining Treatment Decisions Initiative (LSTDI) Acceptance Rates and Sustainability of Pharmacist Recommendations for Short-Stay Veterans Dementia Caregiver Support and Education Enhancing Quality of Prescribing Practices among older Veterans discharged from the Emergency Department (EQUIPPED) Former Prisoner of War Clinic (FPOW) GeriPACT Implementation Implementation of VA Patient Priorities Care in Geriatrics Services (PPC)
Tennessee Valley	 TVHS GeriPACT Age-Friendly Practice Use of a Clinically Derived Risk Calculator to Assess Advance Care Planning for Elderly Veterans in the Outpatient Setting

- Implementation of a Geriatric Patient-Centered Medical Home: Geriatric Patient Aligned Care Team (GeriPACT)
- Reaching Out to Rural Caregivers and Veterans with Dementia Utilizing Clinical Video-Telehealth
- The ICU Liberation Collaborative: Large Scale Implementation of the ABCDEF Bundle in ICUs Around the United States
- A personalized provider-based intervention to improve adherence to initial consultation and decrease no-show rates in a GEC program specialty clinic
- Shared decision-making interventions to address health care goals of Veterans in Geri-PACT with serious advanced illness and high predicted mortality in one year
- Aging Care Transformation through Whole Health Opportunities Leveraging Evaluation, Co-ordination, Allocation of Resources and Empowerment
- Embedding Palliative Care in Clinic in Oncology (EPIC-O)

PERFORMANCE MEASURES

The system of GRECC performance metrics was developed in 1996 to ensure that the reassignment for financial support of GRECCs from GEC to the VA Medical Centers (VAMCs) would not result in individual, localized performance expectations. The metrics underwent an extensive reassessment in 2005 and again in 2008, and since 2009 have been the focus of a standing committee (with rotating membership) that continuously monitors the metrics, GRECC performance and the need to modify them in response to changing VHA and GEC priorities. The measures are described in the table on the following two pages. With very few exceptions, all the GRECC sites accomplished all the performance measures in FY 2020 (see below)

Performance Measure		l	1			l		_	l		
	Target	Ann Arbor	Baltimore	Birmingham Atlanta	Bronx/New York Harbor	Cleveland	Durham	Eastern Colorado	Gainesville	Greater Los Angeles	Little Rock
Negotiated VISN/GRECC Memorandum of Understanding	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes
Average # of funded aging- related research projects per GRECC investigator	1+	6	2.5	6.2	1.8	5.1	3.4	1.7	4.2	12.4	2.5
Average direct research expenditures per GRECC primary core devoted to research	\$500K+	\$783k	\$453k	\$1.1mil	\$1.4mil	\$684k	\$950k	\$606k	\$580k	\$844k	\$2.0mil
Average # publications and papers per GRECC core staff	2+	4.3	3.9	4.2	2.7	8.9	4.7	5.7	5.4	3.2	2.6
Average # peer-reviewed papers per GRECC research investigator	3+	11.5	6.6	13.6	6.1	18.4	8.3	11.9	10.4	5.5	5.7
Total # papers for the GRECC	21+	56	89	94	55	135	72	80	51	36	46
Percentage of papers and publications listing VA affiliation	95%+	100%	82%	97%	86%	97%	97%	100%	96%	100%	100%
# individuals mentored by GRECC staff in a research career development award	1+	15	6	33	26	2	18	34	2	6	1
Total education/training person- hours delivered by GRECC core staff	1500+	4102	12066	14654	64952	6252	3122	4208	7242	8631	4049
# innovative evaluation strategies undertaken for assessing impact of programs	1+	0	0	1	0	0	3	2	0	0	0
# OAA-supported associated health disciplines receiving GRECC-related training	4+	5	5	6	3	6	5	4	7	4	5
Average # scholarly or educational presentations per GRECC core staff	2+	5	7.2	10	4.2	7.6	5.8	4.4	15.1	8.1	7.2
# innovative clinical demonstration projects	1+	8	7	4	5	3	11	8	6	6	6
# clinical demonstration projects that were evaluated	1+	5	1	2	2	1	4	2	2	2	2
# clinical demonstration projects that were disseminated	1+	1	2	1	2	1	3	1	0	2	3
Percentage of GRECC professional staff time devoted to research activities	45%+	50%	74%	49%	59%	49%	55%	56%	38%	37%	62%
Percentage of GRECC professional staff time devoted to education/training activities	10%+	11%	10%	22%	20%	19%	12%	13%	15%	19%	10%
Percentage of GRECC professional staff time devoted to non-GRECC clinical activities	<20%	1%	3%	9%	8%	2%	1%	4%	2%	13%	1%

Performance Measure	Target	Madison	Miami	Minneapolis	New England	Palo Alto	Pittsburgh	Puget Sound	Salt Lake City	San Antonio	Tennessee Valley
Negotiated VISN/GRECC Memorandum of Understanding	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Average # of funded aging-related research projects per GRECC investigator	1+	6.2	5.4	2.9	7.4	6.1	2.1	4.3	1.7	4.3	7.7
Average direct research expenditures per GRECC primary core devoted to research	\$500K+	\$1.6mil	\$610k	\$743k	\$6.3mil	\$1.2mil	\$566k	\$719k	\$369k	\$1.1mil	\$1.7mil
Average # publications and papers per GRECC core staff	2+	2.9	3.4	1.9	5.8	5.8	3.5	4.5	3.6	3.9	8.6
Average # peer-reviewed papers per GRECC research investigator	3+	6.6	5.8	3.4	17.8	9.7	6.1	5.2	6.7	7.5	18.7
Total # papers for the GRECC	21+	50	90	23	180	70	102	78	77	74	147
Percentage of papers and publications listing VA affiliation	95%+	100%	96%	96%	91%	100%	94%	100%	97%	88%	100%
# individuals mentored by GRECC staff in a research career development award	1+	5	2	4	13	6	17	10	17	16	44
Total education/training person-hours delivered by GRECC core staff	1500+	2304	3440	2189	7621	3589	1745	2938	2674	8752	3942
# innovative evaluation strategies undertaken for assessing impact of programs	1+	0	0	0	1	0	0	0	0	0	0
# OAA-supported associated health disciplines receiving GRECC-related training	3+	3	4	6	8	6	7	4	7	2	7
Average # scholarly or educational presentations per GRECC core staff	4+	9.7	7.2	3.3	3.4	8.6	4.3	7.7	4.7	3.1	14.6
# innovative clinical demonstration projects	2+	13	7	6	12	4	5	5	5	12	10
# clinical demonstration projects that were evaluated	1+	4	2	2	8	3	4	1	2	8	5
# clinical demonstration projects that were disseminated	1+	3	1	0	2	1	1	0	2	2	4
Percentage of GRECC professional staff time devoted to research activities	45%+	51%	53%	52%	66%	44%	75%	50%	70%	56%	59%
Percentage of GRECC professional staff time devoted to education/training activities	10%+	19%	12%	16%	14%	14%	10%	17%	13%	17%	17%
Percentage of GRECC professional staff time devoted to non-GRECC clinical activities	<20%	7%	16%	1%	2%	2%	1%	2%	1%	2%	5%

FUTURE OF THE GRECCS

As evidenced by their legacy, ongoing accomplishments, current resources and institutional support, GRECCs are well poised to continue their success as VA's geriatric centers of excellence. The GGAC remains committed to and involved in the GRECCs and will offer valuable guidance both during site visits and biannual meetings.

To address pressing issues for health care in VA and more broadly in the United States, GEC will ask that GRECCs apply their attention and expertise to several issues. First, GRECCs have been and continue to be innovators in assisting VHA response to the global pandemic of COVID-19. GRECCs introduced VIRTUAL Geriatrics, which expands the reach of geriatric care providers to VA rural sites and led in rolling out telehealth management of complex care needs of older Veterans during lockdown. Second, GRECCs are key to ensuring that VHA's Whole Health transformation engages older adults. Third, GRECCs can further develop the next generation of the geriatric workforce, by providing training sites and helping recent graduates to find geriatric-related jobs in VA. In addition, GRECC sites can learn from each other's successes and use the GRECC network to ensure that effective interventions receive broad dissemination, thus increasing attention to GRECC collaborations in cross-cutting initiatives.

SEARCHABLE DATABASE (for VA computer users)

The attached Access application includes all the GRECC staff interests, research studies, clinical demonstration projects, education initiatives and contributions. It can be searched by keyword or GRECC site. To access: click on the link to the GRECC SharePoint: https://dvagov.sharepoint.com/sites/VHAPCSCOE/default.aspx. If you don't have access to the GRECC SharePoint, request access by emailing XXXX. Once access has been granted, open a read-only version of the Search-A-GRECC Database and Save-As to download Search-A-GRECC on your government computer desktop.

GRECC SITES, STAFF AND FOCUS AREAS

Ann Arbor, VISN 10

Geriatric Academic Affiliate: University of Michigan Nursing Academic Affiliate: University of Michigan

Director: Neil Alexander, M.D. (since 10/3/2005)

Associate Director for Research: Roger Albin, M.D. (since 9/1/2017)
Associate Director for Clinical: Christine Cigolle, M.D. (since 8/10/2015)

Associate Director for Education and Evaluation: Caroline Vitale, M.D. (since 7/7/2019)

Administrative Officer: Ashley Guastella, B.A. (since 11/1/2019)

Areas of Research Focus

Mobility and Physical Activity Assessment and Enhancement Infection Control in Long-term Care Parkinson's Disease and Movement Disorders

Baltimore, VISN 5

Geriatric Affiliates: University of Maryland School of Medicine, Johns Hopkins University School of Medicine

Nursing Academic Affiliates: University of Maryland School of Nursing and George Washington University School of Nursing

Director: Leslie Katzel, M.D./Ph.D. (since 5/23/2016)

Associate Director for Research: Richard Macko, M.D. (since 7/1/2001)

Associate Director for Education and Evaluation: Beth Hogans, M.D./Ph.D. (since

4/19/2019)

Associate Director for Clinical (Acting): Jacob Blumenthal, M.D. (since 7/9/2018)

Associate Director: John Sorkin, M.D./Ph.D.

Administrative Officer: Tim Foley (since 12/30/2013)

Areas of Research Focus

Exercise rehabilitation, weight loss, metabolism, and physical function in older Veterans with a focus on age-related chronic disease and disability conditions
Functional genomics, genetics, molecular and cellular biomarkers of aging and chronic disease in Veterans, and how these factors influence outcomes in aging
Chronic Pain

Birmingham/Atlanta, VISN 7

Geriatric Academic Affiliates: University of Alabama at Birmingham SOM, Emory University SOM

Nursing Academic Affiliates: University of Alabama at Birmingham SON, Emory University SON

Director: Alayne Markland, D.O. (since 11/24/2019)

Associate Director for Research: Kathryn Burgio, Ph.D. (since 4/22/2001)

Associate Director for Education and Evaluation: Katharina Echt, Ph.D. (since 6/26/2016)

Associate Director for Clinical: Alayne Markland, D.O. (since 10/4/2015)

Administrative Officer: Latricia Williams (since 10/28/2007)
Associate Director: Elizabeth Vaughan, M.D. (since 4/15/2018)
Associate Director: Molly Perkins, Ph.D. (since 5/20/2012)
Associate Director: Theodore Johnson, M.D. (since 4/15/2018)

Areas of Research Focus

Incontinence and related disorders Mobility Palliative care

Bronx/New York Harbor, VISN 2

Geriatric Academic Affiliate: Icahn School of Medicine at Mount Sinai Nursing Academic Affiliates: New York University Rory Meyers College of Nursing; Fordham University Graduate School of Social Service; Silberman School of Social Work at Hunter College; City University of New York - Lehman College; New York University Silver School of Social Work; James J Peters VAMC PGY-2 Geriatrics Pharmacy Residency Program

Director: Albert Siu, M.D. (since 10/1/2003)

Associate Director for Research: Kenneth Boockvar, M.D. (since 10/1/2007)

Associate Director for Education and Evaluation: Judith Howe, Ph.D. (since 4/1/2001)

Associate Director for Clinical (Acting): William Hung, M.D. (since 1/2/2014)

Administrative Officer: Valerie Menocal (since 12/12/2016)

Areas of Research Focus

Improving palliative care

Prevention of functional disability

Improving processes and outcomes between sites of care including VA/non-VA, rural/non-rural, home/medical center

Cleveland, VISN 10

Geriatric Academic Affiliates: Case Western Reserve School of Medicine, University

Hospitals

Nursing Academic Affiliate: Frances Payne Bolton School of Nursing

Director: Robert Bonomo, M.D. (since 10/1/2008)

Associate Director for Research: David Canaday, M.D. (since 9/1/2010)

Associate Director for Education and Evaluation: Denise Kresevic, Ph.D. (since

10/1/2010)

Associate Director for Clinical: Muralidhar Pallaki, M.D. (since 6/19/2020)

Associate Director: Robin Jump, M.D./Ph.D. (since 6/1/2018)

Administrative Officer: Malva Rashid (since 7/1/2008)

Areas of Research Focus

Infection in the Elderly (HIV/HCV, SARS-CoV-2, Zoster, C. difficile, Resistant Gramnegatives, Bacterial pneumonia)

Antibiotic Stewardship, Infection Prevention and Control in Long Term Care Immunology of Aging

Durham, VISN 6

Geriatric Academic Affiliate: Duke University School of Medicine Nursing Academic Affiliate: Duke University School of Nursing

Director: Kenneth Schmader, M.D. (since 3/1/2007)

Associate Director for Research: Miriam Morey, Ph.D. (since 10/1/2006)

Associate Director for Education and Evaluation: Connie Bales, Ph.D. (since 7/7/1996)

Associate Director for Clinical: Christopher Bowling, M.D. (since 3/5/2019)

Administrative Officer: Harry Babwah, M.A. (since 10/5/2015)

Areas of Research Focus

Infection, immune function, vaccines; polypharmacy, medication management; osteoporosis, falls and fracture management Innovative models of care delivery, transitions and caregiving Optimizing fitness, mobility and nutrition, strategies for health promotion

Eastern Colorado, VISN 19

Geriatric Academic Affiliate: University of Colorado School of Medicine

Nursing Academic Affiliate: N/A

Director: Robert Schwartz, M.D. (since 10/1/2014)

Associate Director for Research: Wendy Kohrt, Ph.D. (since 10/1/2014)

Associate Director for Education and Evaluation: Kathryn Nearing, Ph.D. (since

8/19/2018)

Administrative Officer: Colleen Costello (since 4/1/2018) Associate Director: Lauren Abbate, M.D. (since 7/1/2019)

Areas of Research Focus

Treatment and consequences of obesity in older Veterans (primary)
Gender differences in the health of Veterans (primary)
Intensive approaches to rehabilitation to improve function in older Veterans

Gainesville, VISN 8

Geriatric Academic Affiliate: University of Florida Nursing Academic Affiliate: University of Florida

Director: Ronald Shorr, M.D. (since 1/7/2007)

Associate Director for Research (Acting): Constance Uphold, Ph.D. (since 1/1/2017) Associate Director for Education and Evaluation: Carmen Fernandez, Ph.D. (since 6/18/2012)

Associate Director for Clinical: Rebecca Beyth, M.D. (since 7/1/2014)

Administrative Officer: Vacant

Areas of Research Focus

Patient safety and healthcare quality

Identification, management and prevention of age-related physical and cognitive disability

Greater Los Angeles, VISN 22

Geriatric Academic Affiliates: David Geffen School of Medicine at University of

California at Los Angeles, University of Southern California

Nursing Academic Affiliates: University of California at Los Angeles, California State University (CSU) Long Beach, CSU Northridge, CSU Los Angeles, CSU Dominguez Hills, University of Southern California and Drew University

Director: Cathy Alessi, M.D. (since 7/18/2011)

Associate Director for Research: Jennifer Martin, Ph.D. (since 6/1/2017)

Associate Director for Research: Gregory Cole, Ph.D. (since 1/1/1994)

Associate Director for Education and Evaluation: Josea Kramer, Ph.D. (since 1/1/1993)

Associate Director for Clinical: Steven Castle, M.D. (since 1/1/1995)

Administrative Officer: Eliot Mitchell (since 9/6/2014)

Areas of Research Focus

Cognitive disorders

Sleep

Vulnerable elders

Little Rock, VISN 17

Geriatric Academic Affiliate: University of Arkansas for Medical Sciences

Nursing Academic Affiliates: University of Arkansas for Medical Sciences; University of

Central Arkansas, University of Arkansas at Little Rock; Harding University

Director: Dennis Sullivan, M.D. (since 8/5/1998)

Associate Director for Research (Acting): Kalpana Padala, M.D. (11/22/2019)

Associate Director for Health Science Research (Acting): Ramona Rhodes, M.D. (since

5/10/2020)

Associate Director for Education and Evaluation: Kimberly Garner, M.D. (since

7/31/2016)

Associate Director for Clinical: Prasad Padala, M.D. (since 9/16/2011)

Associate Director: Lana Brown, Ph.D. (since 8/7/2017) Administrative Officer: Julie Smith (since 3/10/2013)

Areas of Research Focus

Biology of Aging Outcomes

Exercise and Nutrition Interventions

Positive Changes in Mental Health, Health Literacy and Behavior

Madison, VISN 12

Geriatric Academic Affiliate: University of Wisconsin (UW) School of Medicine and

Public Health

Nursing Affiliates: UW School of Nursing; UW School of Social Work, UW School of

Pharmacy

Director: Sanjay Asthana, M.D. (since 7/29/2001)

Associate Director for Research: Rozalyn Anderson, Ph.D. (since 4/1/2019)

Associate Director for Education and Evaluation: Elizabeth Chapman, M.D. (since

4/1/2019)

Associate Director for Clinical: Steven Barczi, M.D. (since 4/1/2018)

Administrative Officer: Charity Frey (since 4/30/2017)

Areas of Research Focus

Alzheimer's disease and related dementias

Clinical and Rehabilitation Research including Care Transitions and Dysphagia

Biology of Aging

Miami, VISN 8

Geriatric Academic Affiliates: University of Miami, Florida International University

Nursing Academic Affiliate: Florida International University (RN and PT)

Director: Michael Mintzer, M.D. (Acting) (since 10/1/2014)

Associate Director for Research (Acting): Stuti Dang, M.D. (since 10/1/2018)

Associate Director for Education and Evaluation: Vacant

Associate Director for Clinical: Jorge Ruiz, M.D. (since 10/1/2014) Administrative Officer: (Acting) Mitscher Gajardo (since 6/24/2019)

Areas of Research Focus

Metabolism and Aging (diabetes, cardiovascular disease and cancer)

Frailty and Related Geriatric Syndromes and Interventions for Veterans and Caregivers,

including Stem Cells and Reparative/Regenerative Therapies

Bone and Joint Diseases

Minneapolis, VISN 23

Geriatric Academic Affiliate: University of Minnesota Nursing Academic Affiliate: University of Minnesota

Director: Howard Fink, M.D. (since 8/18/2019)

Associate Director for Research: Catherine Kotz, Ph.D. (since 11/15/2015)

Associate Director for Education and Evaluation: Edward Ratner, M.D. (since

8/21/2017)

Associate Director for Clinical: J. Riley McCarten, M.D. (since 7/1/1996)

Administrative Officer: Ann Bolan, M.A. (since 3/8/2013)

Areas of Research Focus

Dementia evaluation and management, including remote sensing for early signs of cognitive impairment and neuromodulation for treatment of cognitive symptoms Animal models investigating mechanisms of and therapies for neurodegeneration and metabolic aging

Systematic literature reviews on the efficacy and safety of interventions for chronic geriatric conditions

New England, VISN 1

Geriatric Academic Affiliates: Harvard Medical School, Boston University School of

Medicine

Nursing Academic Affiliate: Boston College

Director: Jonathan Bean, M.D.

Associate Director for Research: William Milberg, Ph.D.

Associate Director for Education and Evaluation: Jennifer Moye, Ph.D.

Associate Director for Clinical: Jane Driver, M.D.

Administrative Officer: Myriame Wortham Administrative Officer: Thomas Lucian, B.S.

Associate Director: Lauren Moo, M.D.

Associate Director: Regina McGlinchey, Ph.D.

Areas of Research Focus

Innovative support and care coordination for aging Veterans Risk Identification across the lifespan Novel treatments to optimize wellbeing and independence

Palo Alto, VISN 21

Geriatric Academic Affiliate: Stanford University/School of Medicine

Nursing Academic Affiliates: University of California, San Francisco; Merritt College;

San Francisco State; University of San Francisco.

Other Affiliates: San Jose State; UC Berkeley; Cal State East Bay/Stanislaus/Monterey Bay; Touro University of California; Marshall B. Ketchum University, Southern California College of Optometry; California State University, Long Beach; University of Southern California; VA San Francisco; Foothill-DeAnza Community College; Mission College

Director: Manjula Tamura, M.D. (since 9/3/2017)

Associate Director for Research: Salman Azhar, Ph.D. (since 8/1/2000)

Associate Director for Education and Evaluation: Christine Gould, Ph.D. (since

3/19/2018)

Associate Director for Clinical: Sowmya Iyer, M.D. (since 1/6/2020) Administrative Officer: Mary Westerman, MBA-HCM (since 2/3/2020)

Areas of Research Focus

Biology of Aging

Inflammatory Mechanisms in Degenerative Diseases

Chronic Disease Management in Older Adults

Pittsburgh, VISN 4

Geriatric Academic Affiliate: University of Pittsburgh

Nursing Academic Affiliate: N/A

Director: Steven Graham, M.D./Ph.D. (since 5/28/04)

Associate Director for Research: Vacant

Associate Director for Education and Evaluation (Acting): Debra Weiner, M.D. (since

12/1/2017)

Associate Director for Clinical: Michelle Rossi, M.D. (since 10/25/2006)

Administrative Officer: Dawn Fuhrer, B.A. (since 10/28/07)

Areas of Research Focus

Mechanisms of recovery and novel treatments/rehabilitation strategies for neurodegenerative disease, stroke and TBI

Pharmacoepidemiology, drug safety, clinical and translational informatics to improve medication and patient safety in the long-term care setting

Developing novel clinical care systems for chronic pain, frailty, dementia and long-term care

Puget Sound, VISN 20

Geriatric Academic Affiliate: University of Washington School of Medicine

Nursing Academic Affiliate: University of Washington Schools of Nursing, Social Work

Director: Debby Tsuang, M.D. (since 9/25/2011)

Associate Director for Research: Brian Kraemer, Ph.D. (since 9/2/2018)

Associate Director for Education and Evaluation: Stephen Thielke, MD (since 7/1/2014)

Associate Director for Clinical: Katherine Richey, D.O. (since 8/30/2020)

Administrative Officer: Elizabeth Aigbe, M.S. (since 2/1/2009)

Areas of Research Focus

Aging, genetics, and environmental factors in neurodegeneration and dementia Brain pharmacodynamics and drug transport in normative aging, injury and dementia The endocrinology relating aging, body composition and cancer

Salt Lake City, VISN 19

Geriatric Academic Affiliate: University of Utah Nursing Academic Affiliate: University of Utah

Director: Mark Supiano, M.D.

Associate Director for Research: Russell Richardson, Ph.D.

Associate Director for Education and Evaluation: Jorie Butler, Ph.D.

Associate Director for Clinical: Randall Rupper, M.D.

Administrative Officer: Vacant

Areas of Research Focus

Basic Biomedical: Investigations of the fundamental changes during aging that lead to a decline in brain function especially in the context of impaired immunity and inflammation Applied Clinical: The integrated assessment of vascular function, blood flow and metabolic regulation in both aging and diseased skeletal muscle and how this impacts function both at rest and in response to physical challenges

Health Services: Studies that test interventions to improve outcomes, mainly focusing on medical informatics and computerized clinical systems with respect to decision support tools and collection of data for surveillance, analysis and program evaluation

San Antonio, VISN 18

Geriatric Academic Affiliate: University of Texas Health Science Center at San Antonio Nursing Academic Affiliates: University of Texas Health Science Center at San Antonio – School of Nursing, San Antonio Uniformed Services Health Education Consortium

Director: Sara Espinoza, M.D. (since 8/11/2020)

Associate Director for Research: Nicolas Musi, M.D. (since 3/29/2020)

Associate Director for Education and Evaluation: Becky Powers, M.D. (since

10/1/2017)

Associate Director for Clinical: Vacant

Administrative Officer: Sheva Allen (since 6/7/2020)

Areas of Research Focus

Geroscience Approach to Accelerate New Findings in Basic Aging Biology from the Bench to the Patient's Bedside

Lifestyle Interventions, Including Exercise, to Improve Physical and Metabolic Health in Older Adults

Clinical Trials of Age-Modulating Agents in Older Adults to Improve Physical Function, Frailty, Biologic Resilience, Sarcopenic Obesity, Immune Function, Cardiovascular Health and Cognition

Tennessee Valley, VISN 9

Geriatric Academic Affiliate: Vanderbilt University School of Medicine Nursing Academic Affiliate: Vanderbilt University School of Nursing

Director: Robert Dittus, M.D. (since 11/1/1999)

Associate Director for Research: Wes Ely, M.D. (since 7/16/2000)

Associate Director for Education and Evaluation: Sumathi Misra, M.D. (since 9/22/2013)

Associate Director for Clinical: James Powers, M.D. (since 11/1/1999)

Associate Director: Sandra Simmons, Ph.D. (since 5/1/2007) Administrative Officer: Jeannie Helton (since 12/13/2015)

Areas of Research Focus

Cognitive Impairment
Quality and Safety of Care
Chronic Disease Prevention and Management